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APPLICATION NO.	FILING DATE	FIRST NAMED		NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/802,709	03/08/2001	Andrew		ARC2865N1 1161 (ALZA-0023)		1161
TITLE OF INVENTION: M	IETHODS AND DEVICES I	FOR PROVIDING I	PROLONGED DRI	JG THERAPY	(ALZA-0023)	
APPLN. TYPE	SMALL ENTITY	ISSUE FEI	E P	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330		\$300	\$1630	02/05/2004
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CFR 1.363). Change of correspond Address form PTO/SB/1 Tec Address indicate PTO/SB/47: Rev 03-02 Number is required. ASSIGNEE NAME ANI PLEASE NOTE: Unless been previously submitt (A) NAME OF ASSIGN LZA CORPORATIO Please check the appropriate A. The following fee(s) are XX Issue Fee XX Publication Fee XX Advance Order - # o	cence address (or Change of C 22) attached. ion (or "Fee Address" Indica or more recent) attached. Us D RESIDENCE DATA TO E set at the USPTO or is being NEE IN ic assignee category or category enclosed:	Correspondence tion form e of a Customer BE PRINTED ON Tollow, no assignce da submitted under sep (B) Profices (will not be pri	names of up to agents OR, alter firm (having as agent) and the rattorneys or age will be printed. HE PATENT (print ta will appear on the arate cover. Compl.) RESIDENCE: (CI. ALO ALTO, need on the patent); Payment of Fee(s) XXA check in the a Payment by creck the Director is Deposit Account N	3 registered patent anatively. (2) the name a member a registered ames of up to 2 registred ames of up to 2 registred. If no name is listed or type) are patent. Inclusion of etion of this form is NOTY and STATE OR CONTY AN	assignee data is only approproof a substitute for filing an association or other private inclosed. 8 is attached.	r credit any overpayment, to copy of this form).
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